



MAR-31-2005 16:10

PROCTER &amp; GAMBLE

513 634 3007 P.02/04

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MAR 31 2005

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02/25/2005

THE PROCTER & GAMBLE COMPANY  
INTELLECTUAL PROPERTY DIVISION  
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Teresa A. Wort	(Depositor's name)
<i>Teresa A. Wort</i>	(Signature)
March 31, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/692,385	10/23/2003	Tim Bast	CM1641QD	8484

TITLE OF INVENTION: ZONED DISPOSABLE ABRORBENT ARTICLE FOR URINE AND LOW-VISCOSITY FECAL MATERIAL

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	05/25/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
STEPHENS, JACQUELINE F	3761	604-385010

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

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1 Jay A. Krebs  
2 Jack L. Oney, Jr.  
3 Ken K. Patel

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

The Procter &amp; Gamble Company

(B) RESIDENCE: (CITY and STATE OR FOREIGN COUNTRY)

Cincinnati, Ohio

04/01/2005 AWONDAF2 00000061 162480 10692385  
01 FC:1501 1400.00 DA  
02 FC:1501 300.00 DA  
03 FC:8001 9.00 DA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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Authorized Signature

*Jay A. Krebs*  
Typed or printed name Jay A. Krebs

Date 3-31-2005Registration No. 41,914

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**FROM: Teresa A. Wert (Office of Jay A. Krebs)**

Fax No. 513-634-3007

Phone No. 513-634-3114

Listed below are the item(s) being submitted with this Certificate of Transmission:\*\*

- 1) Issue Fee Transmittal (Orig. & Copy)
- 2) "Fee Address" Indication Form
- 3)
- 4)
- 5)

Number of Pages Including this Page: 4

Inventor(s): Tim Bast et al.

S.N.: 10/692,385

Filed: October 23, 2003

Docket No.: CM1641QDComments:

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